



PTO/SB/81 (09-03)

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and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/679,148
Filing Date	October 3, 2003
First Named Inventor	Dale Keiser
Title	Gelled Laxative Compositions
Art Unit	To Be Assigned
Examiner Name	To Be Assigned
Attorney Docket Number	113592.135A

I hereby appoint:

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as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input checked="" type="checkbox"/> Firm or Individual Name	Ann-Louise Kerner				
Address	Hale and Dorr LLP				
Address	60 State Street				
City	Boston	State	MA	Zip	02109
Country	USA				
Telephone	(617) 526-6000	Fax	(617) 526-5000		

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	Dale Keiser		
Signature			
Date	NOV 26, 2003	Telephone	928 684 1014

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of 2 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name	Richard Turner		
Signature	<i>Richard A. Turner</i>		
Date	11/26/2003	Telephone	202-236-0350

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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